



EXECUTIVE DIRECTOR'S REPORT

Jessica Altman, Executive Director | January 18, 2024 Board Meeting

COVERED CALIFORNIA 2024 BOARD MEETING DATES

All meetings will be held at Covered CA Headquarters, 1601 Exposition Boulevard, Sacramento. Unless otherwise notified, meetings will begin at 10:00 am and are held the third Thursday of the month.

January 18

February 15

March 21 *

April 18

May 16

June 20

July 18 *

August 15

September 19

October 17 *

November 21

December 19 *

**Possibly no meeting*

EXECUTIVE DIRECTOR'S UPDATE

EXECUTIVE DIRECTOR'S UPDATE

- ❑ Open Enrollment
- ❑ State and Federal Updates
- ❑ Data and Research
 - i. Early Research Insights from Medi-Cal Transitioners

OPEN ENROLLMENT

ENROLLMENT TRENDS FOR 2024 – EARLY RESULTS

- ❑ Total net plan selections continue to be consistent with plan selection volumes from prior years.
- ❑ While renewals remain consistent, there is a 11% increase in new enrollment, as the end of the Public Health Emergency drives new enrollment from Medi-Cal.
- ❑ Last week, CMS [announced](#) that over 20 million people have made a plan selection through the marketplaces nationally – marking a record number of enrollments.

Net Plan Selections (Data as of 1/13/2024)	2022 (Count)	2023 (Count)	2024 (Count)	Diff. (2024 v 2023)
New Enrollment	198,377	202,318	225,499	11%
Renewals	1,583,114	1,516,812	1,510,892	0%
Total Plan Selections	1,781,491	1,719,130	1,736,391	1%

Data reflect active plan selections as of early January 13, 2024. Comparisons to prior years align with CMS Week 11 Open Enrollment Priority Metrics submissions.

TRENDS NEW SIGN-UPS – METAL TIER

- ❑ In 2024, 60% of new sign-ups so far have chosen a Silver plan – an increase of nine percentage points over 2023.
- ❑ Multiple policy changes – including the new state cost sharing program, which eliminates deductibles in the Enhanced CSR Silver plans, and SB 260, which automatically enrolls consumers into the Silver tier – likely drive this uptick in Silver enrollment.

Metal Tier	2022 (Share %)	2023 (Share %)	2024 (Share %)
Minimum Coverage	2%	2%	1%
Bronze	27%	28%	25%
Silver	53%	51%	60%
Gold	12%	13%	9%
Platinum	6%	5%	4%
Total	100%	100%	100%

Data reflect non-renewal gross plan selections as of early January 11, 2024.

COMMUNICATIONS AND PUBLIC RELATIONS

December Activity Highlights:

- ❑ Continued engagement with multicultural communities and leaders
- ❑ December OE deadline media pitch; mobile clinics and ethnic roundtables
- ❑ Sustained M2C messaging throughout

Planned January Activity:

- ❑ January statewide OE deadline media push
- ❑ Targeted ethnic media events and outreach



STATE AND FEDERAL POLICY/LEGISLATIVE UPDATES

STATE BUDGET AND LEGISLATIVE UPDATE

- ❑ Governor Newsom released his Fiscal Year 2024-25 State Budget on January 10. Heading into the next fiscal year, California will grapple with a \$37.9 billion budget shortfall and the Governor's budget proposes various program reductions, funding delays, and use of reserves to ensure a balanced budget.
- ❑ Covered California budget items include:
 - \$165 million appropriation to fund a program of financial assistance in plan year 2025 and ongoing.
 - \$2 million ongoing to fund subsidies for striking workers under AB 2530 (Wood, Chapter 695, Statutes of 2022)
 - \$20.35 million ongoing to fund the \$1 per member/per month California Premium Credit
 - Provisional language granting retroactive payment authority for Covered California to cover outstanding state subsidy payments to carriers for the 2020-2021 fiscal year.

GOVERNOR'S STATE BUDGET FISCAL YEAR 2024-25

- ❑ Other key health-related budget provisions include:
 - Maintaining funding for the expansion of Medi-Cal services to all eligible Californians regardless of immigration status.
 - A request for the legislature to seek federal approval to raise the Managed Care Organization (MCO) tax by \$1.5 billion over the currently approved amount.
- ❑ The Governor's proposed budget is subject to negotiation with the State Legislature.

FEDERAL UPDATE

- On November 15, the U.S. Department of Health and Human Services (HHS) released the proposed 2025 Notice of Benefit and Payment Parameters rule to update standards that apply to marketplaces and health plans under the ACA. Building upon the ACA's promise to expand access to quality, affordable health care coverage and care, the proposed rule seeks to better connect individuals to services, streamline states' ability to update their essential health benefit benchmark plans, and improve consumer experience.

- In its [comment letter](#), Covered California applauds HHS's overarching goals for marketplaces and shares feedback on several key proposals from its experience as the largest State-based Marketplace:
 - **Minimum Network Adequacy Standards:** Beginning in 2025, marketplaces would be required to adopt maximum time and distance standards that are at least as stringent as those applicable to the Federally-Facilitated Marketplace and review plan networks pre-certification. While we appreciate HHS's commitment to ensuring that enrollees are afforded meaningful choice and receive timely access to care without facing undue limitations or challenges, Covered California seeks clarification that marketplaces retain appropriate flexibility in how a state reviews and regulates network adequacy standards to avoid potentially duplicative work with state insurance regulators and the creation of separate, competing standards where existing state-specific standards exist.

FEDERAL UPDATE, CONTINUED

- **Changes to the Essential Health Benefits (EHB) Benchmark Plan Framework:** HHS would simplify the process for states to select and update their EHB benchmark plans, adjust the state defrayal of cost requirements, and allow states to include non-pediatric dental services as an EHB if they are part of a state's EHB-benchmark plan. Covered California supports the proposed flexibility, recognizing the importance of allowing states to tailor their benchmark plans to meet their residents' specific needs.
- **Minimum Standards for State-Based Marketplaces:** State-based Marketplaces would be required to provide live assistance during business hours, a centralized eligibility and enrollment platform, and standardized consumer information for web brokers and direct enrollment entities. Highlighting the Covered California Service Center's incredible achievements, we appreciate HHS's commitment to ensuring marketplaces provide exceptional service and critical consumer protections.

EARLY INSIGHTS FROM MEDICAL TRANSITIONERS

Katie Ravel, Director
Policy, Eligibility & Research Division

MEDI-CAL TO COVERED CALIFORNIA ENROLLMENT PROGRAM – NOVEMBER 2023

KEY PERFORMANCE INDICATORS

Data as of 1/12/2024

indicates data not yet settled

		2023						
Medi-Cal to Covered California Transition Data By Month Marketplace Eligibility Begins*	Metric	2023	July	August	September	October	November	December
Medi-Cal Transitions eligible in CalHEERS	<u>E1</u>	1,219,842	34,991	47,642	282,529	209,052	216,790	214,482
Medi-Cal Transitions with plan selection**	<u>PS1</u>	243,112	10,093	11,930	35,308	35,830	43,989	43,874
Auto Plan Selections***	<u>A2</u>	228,148	9,414	10,690	32,770	33,822	41,220	41,354
Effectuated Coverage After Auto Plan Selection	<u>A7</u>	37,693	2,929	3,838	9,604	9,138	12,184	
Effectuated after APS - Eligible for \$0 Silver plan	<u>A11</u>	34%	32%	37%	37%	35%	32%	
Effectuated after APS - Switched out of default plan	<u>C12</u>	27%	30%	28%	26%	26%	25%	
Effectuation Rate After Auto Plan Selections (APS)	<u>A12</u>	31%	31%	36%	29%	27%	30%	
Effectuation rate among APS - eligible for \$0 plan	<u>A13</u>	33%	34%	42%	33%	29%	29%	

* Data excludes any consumers with Medi-Cal redetermination, initially found marketplace eligible, but who returned to Medi-Cal eligibility before losing coverage.

** Includes plan selections by individuals who do not qualify for subsidies and members who were automatically added to an existing family enrollment.

*** A subset of Medi-Cal Transitions with a plan selection. Indicates that consumer received an automatic plan selection when first transitioning from Medi-Cal. Includes consumers who were automatically added to an existing enrollment in the same household, and includes those who later switched into a different plan after auto plan selection.

DOCUMENTING COVERAGE AFTER REDETERMINATIONS

MONTHLY PULSE SURVEY

- ❑ Covered California has been documenting effectuations of new coverage under the new auto plan selection program through administrative data (see [Medi-Cal Transitioner Profiles](#)).
- ❑ However, we know that many individuals may not need marketplace coverage, as they will have moved on to new job-based coverage, Medicare, or other coverage. Additionally, data from DHCS indicate that many consumers who have undergone redeterminations of their eligibility have been able to keep Medi-Cal coverage.
- ❑ Because administrative data on the transition to other coverage sources is not available, Covered California is administering a monthly pulse survey to track consumers' source of coverage, as well as other consumer journey metrics related to the automatic enrollment program.

APS MONTH 1 DATA SNAPSHOT

APS Survey Overview

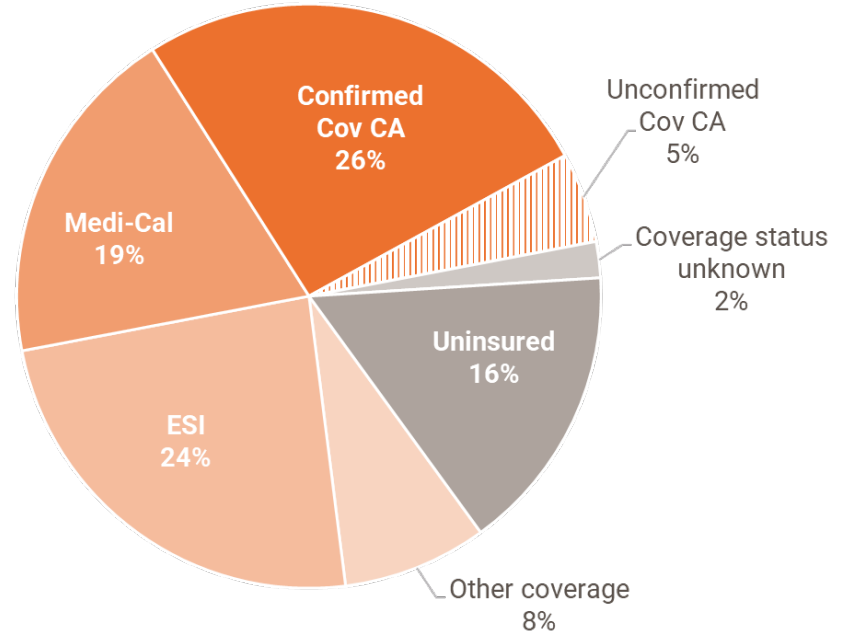
- ❑ **Purpose:** The survey is designed to better understand the coverage statuses at the end of their Special Enrollment Period, as well as awareness of and experiences with the auto-enrollment process. These early results focus on coverage statuses for the first month's cohort, who were auto-enrolled with July 1 coverage start.
- ❑ **Survey Fielding Dates:** September 20 – November 14, 2023
- ❑ **Survey Mode:** Mail-to-web design
- ❑ **Survey Languages:** English and Spanish

Sample Stratum	Sample Release (n)	Response Rate (%)	Completes (n)
Spanish Dominant	732	13.3%	97
Not Spanish Dominant	5,631	11.5%	648
Total	6,363	11.7%	745

APS MONTH 1 DATA SNAPSHOT

Among July APS Consumers: Self-reported Current Coverage

- ❑ Among the first month's cohort of APS consumers, more than three-quarters (77%) reported having coverage – mostly through Covered California, Medi-Cal, or their employer
- ❑ One in six (16%) consumers reported being uninsured.
- ❑ Among the 42% of consumers who confirmed needing coverage, there was a 62% take-up rate with Covered California.*



*Conservatively, if we assume those with unconfirmed coverage statuses to be uninsured, the marketplace take-up rate would be 53%.

Survey variables: COVERAGE_1 "Do you currently have health insurance?" and COVERAGE_2 "What is your main source of health coverage right now?" N=663.

APS Pulse survey conducted on behalf of Covered California by NORC.

CONTINUED DATA COLLECTION AND FUTURE ANALYSIS PLANS FOR MONTHLY PULSE SURVEY

- ❑ The results represent only one month of survey data collected among consumers who were auto-enrolled during the July, the first month of the PHE unwind. Covered California plans to administer the survey for each of the twelve months of the PHE Unwind, allowing for further analysis of coverage changes among consumers.
- ❑ With more months of data available, we may be able to understand demographic differences in take-up and consumer experiences.
- ❑ Month four of the APS survey is currently in field – which will collect data from consumers auto-enrolled during the October APS cohort.

MEDI-CAL TRANSITIONER QUALITATIVE RESEARCH – IN PROGRESS

Research objective: NORC is currently conducting qualitative research to supplement results from the early results of the APS survey, specifically:

- ❑ To understand the how consumers navigate their change in coverage status
- ❑ To understand attitudinal and process barriers to take-up among consumers who report being uninsured

Research approach:

- ❑ 15-20 in-depth interviews, in both English and Spanish, among consumers who were auto-enrolled in Covered California following loss of Medi-Cal coverage
- ❑ Among participants with diverse race/ethnicities, incomes, ages, and geographies
- ❑ Focusing on individuals who report being uninsured or currently enrolled in Covered California

PUBLIC COMMENT

CALL: (877) 336-4440

PARTICIPANT CODE: 6981308

- ❑ To request to make a comment, press 10; you will hear a tone indicating you are in the queue for comment. Please wait until the operator has introduced you before you make your comments.
- ❑ If watching via the live webcast, please mute your computer to eliminate audio feedback while calling in. Note, there is a delay in the webcast.
- ❑ The call-in instructions can also be found on page two of the Agenda.

EACH CALLER WILL BE LIMITED TO TWO MINUTES PER AGENDA ITEM

NOTE: Written comments may be submitted to BoardComments@covered.ca.gov.

APPENDICES

APPENDICES: TABLE OF CONTENTS

- ❑ Service Center Update
- ❑ California for Small Business Update
- ❑ CalHEERS Update

SERVICE CENTER UPDATE

Improving Customer Service

- ❑ Added information regarding the federal 1095 forms on the Interactive Voice Response (IVR) system
- ❑ Extended hours of Operation on 12/28 – 8am to 8pm, 12/29 - 8am to 10pm, and open on Saturday, 12/30 - 8am to 6pm and Sunday, 12/31 – 8am to 6pm.

Enhancing Technology Solutions

- ❑ Partnered with CCIT on the project of providing Service Center Representatives with the conversation details when consumers request to speak with a live agent while interacting with CiCi the Chatbot.

Staffing Updates

- ❑ Vacancy rate of 8.3 percent (2023) comparable to prior year of 5.5 percent (2022)

SERVICE CENTER UPDATE

Comparing December 2023 vs. 2022 Call Statistics

Year	Calls to IVR	Calls Offered to SCR	Abandoned %	Calls Handled	ASA	AHT	Service Level %
2023	464,636	292,551	6.95%	268,368	0:05:29	0:21:37	55.39%
2022	398,461	255,270	4.22%	242,600	0:02:16	0:20:55	69.30%
Percent Change	17% Increase	15% Increase	65% Increase	11% Increase	142% Increase	3% Increase	20% Decrease

- ❑ The total Calls Offered increased from 2022 by 15%
- ❑ Calls Handled increased from 2022 by 11%
- ❑ The Abandoned % increased from 2022 by 65%
- ❑ Service Level decreased from 2022 by 20%

SERVICE CENTER UPDATE

December Weekly Quick Sort Transfers

Week 1	Week 2	Week 3	Week 4	Week 5*	Total
12/1 - 12/2	12/3 - 12/9	12/10 - 12/16	12/17 - 12/23	12/24 - 12/31	
392	2,363	2,681	2,140	2,821	10,397

*Partial Week - All CoveredCA Service Centers closed on Monday, December 25th, 2023, in observance of Christmas Day. Also includes Sunday, December 31, 2023.

December Consortia Statistics

SAWS Consortia	Calls Offered	Service Level %	Calls Abandoned %	ASA
CalSAWS	4,556	89.07%	2.77%	0:00:56

- ❑ CalSAWS = Statewide Automated Welfare System (consortia). November 2023 all SAWS consortia's were combined.

COVERED CALIFORNIA FOR SMALL BUSINESS

Group & Membership Update:

- Groups: 8,679
- Members: 76,401
- Average Group Size: 8.6
- YTD New Sales: 7,246

**membership reconciled through 11/14/23*



CALHEERS UPDATES

CalHEERS Feature Release 24.2, scheduled for February 12, 2024, will include:

- ❑ Enhancements to the Medi-Cal Transitioners (MCT) Dashboard will now show the designated enroller, if applicable, along with a “Find Local Help” link, providing consumers with additional resources for enrollment assistance.
- ❑ Enhancements to the reasonable compatibility percentage calculation for APTC/CAPS/CSR consumers by introducing a dedicated page where authorized users can adjust the reasonable compatibility threshold percentage and corresponding dollar amount.

CALHEERS UPDATES

- ❑ Improve Issuer Portal user experience and support by granting access to more granular enrollment data in alignment with the EDI 834.
- ❑ Enhance existing functionality to evaluate pending applicants for Accelerated Enrollment from initial intake month, when individual is determined as MAGI Medi-Cal Pending during the initial intake.
- ❑ Improve Periodic Verification process to cease exchange program benefits after a consumer's date of death by terminating enrollment the following day.

CALHEERS UPDATES

- ❑ CalHEERS will enable SAWS to stage a list of individuals from a provided extract and mark their MAGI Medi-Cal status as Discontinued using the Enhanced Prior Eligibility Look Back Logic, which is to be applied in the next eligibility run only.
- ❑ Enhance CalHEERS Portal to direct Medi-Cal consumers seeking to renew their benefits towards platforms where they can more efficiently complete the task, such as BenefitsCal.

CALHEERS UPDATES

Enroller Portal Enhancements:

- ❑ Privileged admin users can now renew dental-only plans for consumers, ensuring continuous coverage, and enrollers will have expanded access to verify details such as CSR tier, transactional data, and EDI logs, enhancing service accuracy.
- ❑ Enrollers can simultaneously search multiple enrollments and download data for in-depth analytics.

CALHEERS UPDATES

Covered California Updates:

- ❑ Covered California AI Chat
 - Our internal AI assistant is live! The team is continuing to enhance functionality through a CCU survey and ongoing workshops.
- ❑ CiCi Enhancements
 - New flows support M2C transitioners and click-to-call users.
- ❑ Translation Efforts
 - Get Started page content has been translated to create parallel in language experiences.
 - Research to further automate portions of the translation process through Smartling is underway.

CALHEERS UPDATES

Covered California Updates:

- ❑ Dotcom Exits Dashboard
 - The team is collaborating with PERD, Communications, and Marketing to create a robust dashboard capturing analytic insights across the Dotcom and CalHEERS experience.

OUTREACH & SALES ENROLLMENT PARTNER TOTALS

Uncompensated partners supporting enrollment assistance efforts

ENROLLMENT ASSISTANCE PROGRAM	ENTITIES	COUNSELORS
Certified Application Counselor	185	1219
Plan-Based Enroller	13	565
Medi-Cal Managed Care Plan	3	34

OUTREACH & SALES NON-ENGLISH ENROLLMENT SUPPORT

Data as of January 2, 2024

11,309 Certified Insurance Agents

- 18.9% Spanish
- 9.9% Chinese
- 4.1% Vietnamese
- 4.7% Korean
- 20.7% Other Languages

1,177 Navigator: Certified Enrollment Counselors

- 58.6% Spanish
- 4.1% Chinese
- 1.6% Vietnamese
- 1.2% Korean
- 6.0% Other Languages

1,219 Certified Application Counselors

- 50.9% Spanish
- 4.4% Chinese
- 1.3% Vietnamese
- .5% Korean
- 4.3% Other Languages

565 Certified Plan Based Enrollers

- 21.6% Spanish
- 3.0% Chinese
- 1.2% Vietnamese
- .5% Korean
- 1.6% Other Languages

34 Certified Medi-Cal Managed Care Plan Enrollers

- 50.0% Spanish
- 0% Chinese
- 2.9% Vietnamese
- 0% Korean
- 0% Other Languages

